| Case 16-15627 Doc 1 Fill in this information to identify your case: | Filed 05/06/16 | Entered 05/06/16 18:17:32 age 1 of 70 | Desc Main |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| About Debtor 1: About Debtor 2 (Spouse Only in a Joint Companies) Marie First name Write the name that is on your government-issued picture identification (for example, your driver's license or passport Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) First name Middle name First name First name Middle name First name First name First name First name Last name First name | ase): |
|--|-------|
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport Bring your picture identification to your meeting with the trustee. 2. All other names you have used in the last 8 years Include your married or maiden names. First name Middle name Last name Suffix (Sr., Jr., II, III) First name Middle name First name Middle name First name Last name Last name First name Last name Last name Last name | |
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport Bring your picture identification to your meeting with the trustee. 2. All other names you have used in the last 8 years Include your married or maiden names. Middle name Middle name Last name Suffix (Sr., Jr., II, III) First name First name Middle name First name Last name Last name Last name Last name | |
| your government-issued picture identification (for example, your driver's license or passport Bring your picture identification to your meeting with the trustee. 2. All other names you have used in the last 8 years Include your married or maiden names. Middle name Last name Last name Suffix (Sr., Jr., II, III) First name First name Middle name Middle name Last name Last name Last name Last name Last name | |
| example, your driver's license or passport Bring your picture identification to your meeting with the trustee. 2. All other names you have used in the last 8 years Include your married or maiden names. Randle Last name Last name | |
| Bring your picture identification to your meeting with the trustee. 2. All other names you have used in the last 8 years Include your married or maiden names. Bring your picture identification to your meeting with (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) First name First name Middle name Last name Last name | |
| identification to your meeting with the trustee. 2. All other names you have used in the last 8 years Include your married or maiden names. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) First name First name Middle name Last name Last name Last name | |
| have used in the last 8 years Middle name Include your married or maiden names. Last name First name Middle name Last name Last name | |
| have used in the last 8 years Middle name Include your married or maiden names. Last name First name Middle name Last name Last name | |
| Include your married or maiden names. Middle name Last name Last name Last name | |
| Include your married or maiden names. Last name Last name Last name | |
| Last name Last name | |
| First name First name | |
| | |
| Middle name Middle name | |
| Last name Last name | |
| 3. Only the last 4 digits XXX - XX- 9339 XXX - XX- | |
| Security number or OR OR | |
| federal Individual 9 xx - xx- Taxpayer Identification number (ITIN) | |

Marie Case 16-15627 Doc 1 Filed 05k96k16 Entered 05/06/16 /18/17:32 Desc Main Debtor 1 Page 2 of 70 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 13140 S. Eberhart Number Street Number Street Riverdale 60827 Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Marie Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 (1884) 17:32 Desc Main

Document Document Page 3 of 70 Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

Marie Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 /18:417:32 Desc Main Debtor 1 Page 4 of 70 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

State

City

Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this about credit bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this counseling before you bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of file for bankruptcy. completion. completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment following choices. If plan, if any. plan, if any. you cannot do so, you are not eligible to I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from file. an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and If you file anyway, exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required your creditors can you to file this case. you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental Incapacity. Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a military combat zone. military combat zone. If you believe you are not required to receive a briefing about If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

credit counseling, you must file a motion for waiver of credit

counseling with the court.

Page 6 of 70 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded □ No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Marie Randle Signature of Debtor 2 Signature of Debtor 1 Executed on 5/6/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| rrect. | | | | |
|--|-------|------|---------------------------|-------------------------|
| /s/ Daniel Giannola Signature of Attorney for Debtor | | Date | 5/6/2016 MM / DD / YYY | YY |
| Daniel Giannola | | | | |
| Printed name | | | | |
| Semrad Law Firm | | | | |
| Firm name | | | | |
| Street | | | | |
| City | State | | | Zip Code |
| City | Siale | | | Zip Gode |
| Contact phone | | Em | nail address | dgiannola@semradlaw.com |
| Bar number | | Sta | ite | |

Doc 1 Filed 05/06/16 Entered 05/06/16 18:17:32 Desc Main Fill in this information to identify your case: Debtor 1 Marie Randle First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$26,475.00 1b. Copy line 62, Total personal property, from Schedule A/B \$26,475.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$4,783.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$5.565.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$10,348.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$2.003.89 Copy your combined monthly income from line 12 of Schedule I.....

Official Form 106Sum

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$2,036.00

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| Pa | t4: Answer These Questions for Administrative and Statistical Records | | | | | | | | |
|------|--|----------------------------|--|--|--|--|--|--|--|
| 6. 4 | Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court | with your other schedules. | | | | | | | |
| | ✓ Yes. | | | | | | | | |
| 7. \ | What kind of debt do you have? | | | | | | | | |
| | Your debts are primarily consumer debts. Consumer debts are those incurred by an individual prim family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. | | | | | | | | |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. C this form to the court with your other schedules. | heck this box and submit | | | | | | | |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Copy 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$1,434.99 | | | | | | | |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | | | | |
| | From Part 4 on Schedule E/F, copy the following: | Total claim | | | | | | | |
| | 9a. Domestic support obligations (Copy line 6a.) | \$0.00 | | | | | | | |
| | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | | | | | | | |
| | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | | | | | | | |
| | 9d. Student loans. (Copy line 6f.) | \$0.00 | | | | | | | |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0.00 | | | | | | | |
| | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | \$0.00 | | | | | | | |
| | 9g. Total. Add lines 9a through 9f. | \$0.00 | | | | | | | |

| | Case 16-15627 | 7 Doc 1 | Filed 05/06/16 | Entered 05/06/16 | 18:17:32 | Desc Main |
|-----------------------------------|--|--|---|---|---|--|
| Fill in this | information to identify your case | et | | Jacobson | | |
| Debtor 1 | Marie | | Rand | le | | |
| | First Name | Middle | Name Last N | Name | | |
| Debtor 2 (Spouse, i | f filing) First Name | Middle | Name Last N | Name | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of II | Illinois State) | | |
| Case num (If known) | nber | | (1 | | | |
| Officia | al Form 106A/B | | | | | Check if this is an amended filing |
| Sche | dule A/B: Prope | rty | | | | 12/1 |
| esponsib rrite your Part 1: | where you think it fits best. Be le for supplying correct infor- name and case number (if kn Describe Each Residen- I own or have any legal or equal No. Go to Part 2 | mation. If more s own). Answer eve ce, Building, I | pace is needed, attach ery question. Land, or Other Rea | a separate sheet to this form | m. On the top of | any additional pages, |
| | | | | | | |
| 1.1 | Yes. Where is the property? | | What is the property Single-family home | | the amount of a | secured claims or exemptions. Put ny secured claims on Schedule D: |
| | Street address, if available, or | other description | Duplex or multi-un | | Creditors Who | Have Claims Secured by Property. |
| | | | Condominium or co | ooperative | Current value entire property | |
| | | | Manufactured or m | obile home | —————————————————————————————————————— | — portion you own: |
| | Number Street | | Land | | Describe the n | ature of your ownership |
| | Number Street | | Investment property Timeshare | 1 | interest (such | as fee simple, tenancy by |
| | City State | Zip Code | Other | | the entireties, | or a life estate), if known. |
| | | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the | debtors and another | (see instru | nis is community property uctions) |
| | | | property identification | ou wish to add about this ite on number: | m, such as local | |
| If you o | own or have more than one, list h | | What is the property Single-family home | | the amount of a | secured claims or exemptions. Put ny secured claims on Schedule D: |
| | Street address, if available, or o | other description | Duplex or multi-un Condominium or co | it building ooperative | Current value entire property | |
| | | | Land | oblie nome | | |
| | Number Street | 7: 0: 1: | Investment property Timeshare Other | / | interest (such | ature of your ownership as fee simple, tenancy by or a life estate), if known. |
| | City State | Zip Code | Ц | | | |
| | | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor | in the property? Check one. or 2 only debtors and another | Check if the characteristic (see instru | nis is community property uctions) |

Other information you wish to add about this item, such as local property identification number:

| Street address, if available, or other description Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Investment property Investment property Investment property Investment property Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and 3 an | , not realite | | | |
|--|---|---|--|--|
| City State Zip Code Cher. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make Hyunda Model: Sonata Yesr: Approximate mileage: 67000 Who has an interest in the property? Check One. Creditors Who Have Claims Secured by Pro- Cre | Street address, if available, or | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | entire property? portion you own? Describe the nature of your ownership |
| Debtor 1 only (see instructions) Debtor 2 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make Model: Sonata Year: Do not deduct secured claims or exemptions. the amount of any secured claims or schedule. In the property? Check one. Do not deduct secured claims or exemptions. the amount of any secured dolaims on Schedule. In Debtor 1 only Debtor 1 only The House of the debtors and another of the debtors and another one. Creditors Who Have Claims Secured by Proportional mileage: Describe Your Vehicles Do not deduct secured claims or exemptions. the amount of any secured claims on Schedule. Creditors Who Have Claims Secured by Proportional mileage: Do not deduct secured claims or exemptions. The amount of any secured claims or exemptions. The amount of any secured dolaims on Schedule. Creditors Who Have Claims Secured by Proportional mileage: Do not deduct secured claims or exemptions. The amount of any secured claims or exemptions. The amount of any secured claims or exemptions. | City State | Ĺ | Other | |
| property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make Hyundai Mho has an interest in the property? Check Model: Sonata one. Do not deduct secured claims or exemptions. the amount of any secured claims on Schedule. Year: 2009 Debtor 1 only Approximate mileage: 67000 | |)]]] | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | |
| Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles arou own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make Hyundai Who has an interest in the property? Check Do not deduct secured claims or exemptions. the amount of any secured claims on Schedule. Year: Year: 2009 Debtor 1 only Creditors Who Have Claims Secured by Property of the secured property? Include any vehicles and Unexpired Leases. Do not deduct secured claims or exemptions. The property? Check Do not deduct secured claims or exemptions. The property? Check Creditors Who Have Claims Secured by Property? Check Creditors Who Have Check Creditors W | | r Portion you own for all | property identification number: I of your entries from Part 1, including any entries | for pages |
| you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make Model: Year: Approximate mileage: Model: Approximate mileage: Model: Approximate mileage: Model: Approximate mileage: Model: Do not deduct secured claims or exemptions. the amount of any secured claims on Schedule. Creditors Who Have Claims Secured by Property Check one. | Part 2: Describe Your Vehic | | | |
| 3.1 Make Hyundai Who has an interest in the property? Check On ont deduct secured claims or exemptions. Model: Sonata one. Year: 2009 Debtor 1 only Approximate mileage: 67000 Do not deduct secured claims or exemptions. the amount of any secured claims on Schedul Creditors Who Have Claims Secured by Property. | | | | |
| Approximate mileage: 67000 Debtor 2 only | Do you own, lease, or have legal of you own that someone else drives. If you own that someone else drives. | or equitable interest in you lease a vehicle, also | report it on Schedule G: Executory Contracts and Unex | |
| Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only Salter that debtors are defined to the debtors are | Do you own, lease, or have legal of you own that someone else drives. If yes ar. | or equitable interest in you lease a vehicle, also utility vehicles, motorcyc Hyundai Sonata 2009 | who has an interest in the property? Check one. | |
| instructions) 3.2 Make Who has an interest in the property? Check Do not deduct secured claims or exemptions. | Do you own, lease, or have legal of you own that someone else drives. If year: Approximate mileage: Other information: | or equitable interest in you lease a vehicle, also utility vehicles, motorcyc Hyundai Sonata 2009 | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? |
| Year: Debtor 1 only Creditors Who Have Claims Secured by Pro | Do you own, lease, or have legal of you own that someone else drives. If you own that someone you own that someone else drives. If you own that someone else drives. 3.1 Make Model: Year: Approximate mileage: Other information: 2009 Hyundai Sonata | or equitable interest in you lease a vehicle, also utility vehicles, motorcyc Hyundai Sonata 2009 | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$8150.00 Do not deduct secured claims or exemptions. Put |
| Approximate mileage: Other information: Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do you own, lease, or have legal of you own that someone else drives. If year: 3.1 Make Model: 3.2 Make Model: Year: | or equitable interest in you lease a vehicle, also utility vehicles, motorcyc Hyundai Sonata 2009 | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$8150.00 Current value of the portion you own? \$8150.00 |

| Debtor 1 | Marie Case 16-15627 Doc 1 | Filed 05/06/16 Entered 05/06/16 | 6/4k8i417: <u>32 Des</u> | c Main | |
|----------|---|---|--|----------------------------|--|
| | First Name Middle Name | Document Page 12 of 70 | | | |
| 3.3 | Make | Who has an interest in the property? Check | Do not deduct secured cl | • | |
| | Model: Year: | one. Debtor 1 only | the amount of any secure | ims Secured by Property. | |
| | Approximate mileage: | | Orcators vino riave ora | iins occured by 1 roperty. | |
| | ··· <u> </u> | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured cl | • | |
| | Model: | one. | the amount of any secure | | |
| | Year: | Debtor 1 only | Creditors Who Have Cl | ims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| | No Yes | | | | |
| 4.1 | Make | Who has an interest in the property? Check | Do not deduct secured cl | aims or exemptions. Put | |
| | Model: | one. | the amount of any secure | • | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 4.2 | Make | Who has an interest in the property? Check | ck Do not deduct secured claims or exemptions. Put | | |
| | Model: | one. | the amount of any secure | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see instructions) | | | |
| | | II of your entries from Part 2, including any entries f | I DO | 150.00 | |
| you na | TO ALLEGING FOR FAIR L. WITE CHALLIUM DEL HEI | · · · · · · · · · · · · · · · · · · · | | | |

Debtor 1 Marie Case 16-15627
First Name Doc 1 Filed 05/06/16 Entered 05/06/16 18:417:32 Desc Main

Middle Name Document Page 13 of 70

Describe Your Personal and Household Items

| D | o you own or ha | ve any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|----------|--|--|--|
| 6 | . Household goods | and furnishings | |
| | Examples: Major appl | ances, furniture, linens, china, kitchenware | |
| | No | | |
| <u></u> | Yes. Describe | Used Furniture | Форо ор |
| Ľ | | ood i difficie | \$600.00 |
| | | and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music | |
| Ш | No | | |
| ✓ | Yes. Describe | 2 Flatscreen TVs | \$800.00 |
| 8 | . Collectibles of valu | ie | |
| | Examples: Antiques a | nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; | |
| | stamp, coi | n, or baseball card collections; other collections, memorabilia, collectibles | |
| ✓ | No | | |
| | Yes. Describe | | |
| | Earlinment for one | uto and habbins | |
| | | otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments | |
| ✓ | No | | |
| П | Yes. Describe | | |
| | | | |
| | 0. Firearms Examples: Pistols, rifle | es, shotguns, ammunition, and related equipment | |
| ⊻ | No | | |
| | Yes. Describe | | |
| | 1. Clothes Examples: Everyday o | clothes, furs, leather coats, designer wear, shoes, accessories | |
| | | Llood Clothing | |
| Ľ | Dodolibe | Used Clothing | \$400.00 |
| | 2. Jewelry Examples: Everyday je gold, silver No | welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| | Yes. Describe | Misc Costume Jewlery | **** |
| | 100. 20001120 | wild design to device y | \$25.00 |
| | 3. Non-farm animals | | |
| | Examples: Dogs, cats | , טונט, ווטוסכס | |
| ⊻ | No | | |
| | Yes. Describe | | |
| 1 | 4. Any other nerson: | al and household items you did not already list, including any health aids you did not list | |
| | No | | |
| | Yes. Describe | | |
| 1 | 5. Add the dollar val | ue of all of your entries from Part 3, including any entries for pages you have attached | #0005.00 |
| | | number here | \$3325.00 |

Marie Case 16-15627 Doc 1 Debtor 1

Document Page 14 of 70 **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. **✓** No Institution name: Yes 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

| Deb | tor 1 Marie Case 10 | | oc 1 | Filed 05k96k16 | | 06/116 /118/17: <u>32</u> | Desc Main |
|-----|---|---------------------|-------------|---|-------------------------|----------------------------------|--------------|
| | First Name | Middle | le Name | Document ne | Page 15 of 70 | 0 | |
| 20. | Negotiable instruments i | nclude personal che | ecks, cash | gotiable and non-negot niers' checks, promissory r nsfer to someone by signir | otes, and money orde | ers. | |
| | Yes. Give specific information about them | Issuer name: | | | | | |
| | | | | | | | |
| 21. | Examples: Interests in IF | | 401(k), 40 | 03(b), thrift savings accou | nts, or other pension o | or profit-sharing plans | |
| | ✓ No Yes. List each | Type of account: | | Institution name: | | | |
| | account separately. | 401(k) or similar | plan: | | | | _ |
| | | Pension plan: | | | | | |
| | | IRA: | | | | | |
| | | Retirement accou | ınt: | | | | |
| | | Keogh: | | | | | |
| | | Additional accour | nt: | | | | |
| | | Additional accour | nt: | | | | _ |
| 22. | Your share of all unused | deposits you have m | | at you may continue servic oublic utilities (electric, gas | | | |
| | Yes | | | Institution name: | | | |
| | | Electric: | | | | | _ |
| | | Gas: | | - | | | _ |
| | | Heating oil: | | | | | |
| | | Security deposit of | on rental u | ınit: | | | _ |
| | | Prepaid rent: | | | | | _ |
| | | Telephone: | | | | | _ |
| | | Water: | | | | | _ |
| | | Rented furniture: | | | | | |
| | | Other: | | | | | |
| 23. | Annuities (A contract fo | r a periodic paymen | nt of mone | y to you, either for life or fo | r a number of years) | | _ |
| | Yes | Issuer name and | descriptio | n: | | | |
| | | | | | | | |
| | | - | | | | | |

| Debt | or 1 | Marie First Na | Cas | se 1 | 6-1562 ⁻ | 7 Doc 1 Middle Name | | 05/06/16 cumenter | | | 16 (148) 17: <u>32</u> | Des | sc Main |
|------|-------|------------------------------|--------------------------|---------------------|--|---------------------------------------|---------------|----------------------|-------------|---------------------|-------------------------------|-----------------|--|
| 24. | | | | | | n an account in and 529(b)(1). | a qualifie | d ABLE progra | m, or und | ler a qualified sta | ate tuition program. | | |
| | | No Yes | | nstitutio | on name and | d description. Sep | parately file | e the records of a | ny interes | s.11 U.S.C. § 521 | (c): | | |
| 25. | exe | rcisab | • | | uture intercoenefit | ests in property | (other th | an anything lis | ted in line | 1), and rights o | r powers | | |
| | | No Yes. [| Descril | oe | | | | | | | | | |
| 26. | Еха | <i>mples:</i> No | | et dom | | s, trade secrets, websites, procee | | | | ments | | | |
| 27. | | enses, | , franc Buildi | hises ng per | | general intangil ive licenses, coo | | ssociation holdir | gs, liquor | licenses, professi | onal licenses | | |
| Mor | ney (| or pr | oper | ty ow | ed to yo | u? | | | | | | po Do | rrent value of the rtion you own? not deduct secured ms or exemptions. |
| 28. | _ | refund | ls owe | ed to y | ou | | | | | | | | |
| | | Yes. G a y | bout thou alre | nem, ir eady fil | nformation ncluding whe ed the return ars | | | | | | Federal: State: Local: | - | |
| 29. | | i ly su p nples: I | | ue or lu | ımp sum aliı | mony, spousal su | oport, child | d support, mainte | nance, div | orce settlement, p | roperty settlement | - | |
| | Ħ | No Yes. G | ive sp | ecific ir | nformation | | | | | | Alimony: | - | |
| | | | | | | | | | | | Maintenance: | - | |
| | | | | | | | | | | | Support: Divorce settlement | - t: | · |
| | | | | | | | | | | | Property settlemen | - | |
| | | nples: \ | Unpaid | d wage | - | | | • | pay, vacat | on pay, workers' c | ompensation, | | |
| | | No Yes. D | escrib | e | | | | | | | | | |

| Debt | tor 1 | Marie Case 10 First Name | <u>6-15627</u> | Doc 1 Middle Name | Filed 05/06 Documen | | <u>Entered</u> 05/06 Page 17 of 70 | Мыбак8ы47: <u>32 Г</u> | Desc Main |
|------|-------------|--|------------------|----------------------|---|------------|---------------------------------------|-----------------------------|---|
| 31. | Inte Exa | | | | | | | | |
| | | No Yes. Name the insur of each policy and li | | | Company name: | | | Beneficiary: | Surrender or refund value: |
| 32. | If yo | | of a living trus | | meone who has did ceeds from a life insu | | olicy, or are currently enti | tled to receive | |
| 33. | | | | | ı have filed a lawsu | | ade a demand for paym | ent | |
| | | No | Workman's Co | | | | | | \$15000.00 |
| 34. | | er contingent and et off claims | unliquidated | claims of e | ery nature, includ | ing cou | nterclaims of the debt | or and rights | |
| | ✓ | No Yes. Describe | | | | | | | |
| 35. | _ | financial assets yo | ou did not alre | ady list | | | | | |
| | | Yes. Describe | | | | | | | |
| 36. | | | - | | _ | - | es for pages you have a | | \$15000.00 |
| Part | 5: | Describe Any E | Business-R | elated Pro | pperty You Own | or Ha | ve an Interest In. I | List any real estate | in Part 1. |
| 37. | Doy | ou own or have ar | ny legal or equ | uitable inter | est in any business | s-related | l property? | | |
| | | No. Go to Part 6. Yes. Go to line 38. | | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | | ounts receivable o | commission | s you alread | y earned | | | | |
| | = | No Yes. Describe | | | | | | | |
| 39. | Exar | | | | odems, printers, cop | oiers, fax | machines, rugs, telepho | nes, desks, chairs, electro | onic devices |
| | | No Yes. Describe | | | | | | | |

| Deb | otor 1 Marie Case 16 | <u>0-15627 D0C 1</u> | FIIED OSKAROKIO | Entered (co/co/ob/ob | 60 (italis 86 with 7:32 D | esc Main | _ |
|-------|---|--|--|-----------------------------|---------------------------|---|---|
| 40. | First Name Machinery, fixtures, eq | Middle Name uipment, supplies you u | DOCUM [®] Nt ^{me} l se in business, and tools o | Page 18 of 70 fyour trade | | | |
| | ✓ No | | | | | | |
| | Yes. Describe | | | | | | - |
| 41. | Inventory | | | | | | |
| | ✓ No | | | | | | |
| | Yes. Describe | | | | | | - |
| 42. | Interests in partnershi | ips or joint ventures | | | , | 1 | |
| | ✓ No | | N | | 0/ / | | |
| | Yes. Give specific information about | | Name of entity: | | % of ownership: | | |
| | them | | | | | | |
| 12 (| Customor lists mailing | lists, or other compilation | | | | | |
| 45. 1 | | nsis, or other compliant | nis | | | | |
| | ✓ No Ves Do your lists in | clude personally identifiabl | e information (as defined in 11 | U.S.C. & 101(Δ1Δ)\2 | | | |
| | □ No | order personally recrimasi | e information (as defined in 11 | 0.0.0.3 101(+1/1)/. | | | |
| | Yes. Descr | ibe | | | | | |
| | _ | | | | | - | |
| 44. | Any business-related p | property you did not alrea | ady list | | | | |
| | No | | | | | | |
| | Yes. Give specific information | | | | | | |
| | mornador | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | U - f | or the standard and the second second second | | | | _ |
| | art 5. Write that number | | rt 5, including any entries f | or pages you nave attach | ea ▶ | | |
| Part | | Farm- and Commerc | ial Fishing-Related Pro | operty You Own or H | ave an Interest In | | _ |
| 46. | Do you own or have a | ny legal or equitable inte | rest in any farm- or comme | rcial fishing-related prope | erty? | | _ |
| | ✓ No. Go to Part 7. | | | | | Current value of the | |
| | Yes. Go to line 47. | | | | | portion you own? Do not deduct secured claims or exemptions | |
| 47. | Farm animals Examples: Livestock, pour | ultry, farm-raised fish | | | | | |
| | ✓ No | 3 , | | | | | |
| | Yes. Describe | | | | | | - |
| | | | | | | 1 | |

| Deb | tor 1 Marie Case 1 First Name | 6-15627 | Doc 1 Middle Name | Filed 05#96 Documen | | Entered 04 Page 19 of | 5/06/16 /168:17: <u>32</u> 70 | Desc | <u>Main</u> |
|--------------|---|-------------------|----------------------|------------------------|------------|-----------------------|---|--------|--------------|
| 48. | Crops-either growing | or harvested | | Documen | | i age 15 oi | 70 | | |
| | ✓ No | | | | | | | | |
| | Yes. Describe | | | | | | | _ | _ |
| 49. | Farm and fishing equ | ipment, implen | nents, mach | inery, fixtures, and | d tools | of trade | | | |
| | ✓ No | | | | | | | | |
| | Yes. Describe | | | | | | | | |
| 50. | Farm and fishing sup | plies, chemical | s, and feed | | | | | | |
| | ✓ No | | | | | | | | |
| | Yes. Describe | | | | | | | | |
| 51. | Any farm- and comme | ercial fishing-re | lated proper | ty you did not alre | eady lis | st | | | |
| | ✓ No | | | | | | | | |
| | Yes. Describe | | | | | | | _ | |
| | | | | | | | | | |
| | dd the dollar value of a art 6. Write that numbe | - | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Part | | | | | in Th | at You Did No | t List Above | | |
| 53. | Do you have other pro Examples: Season ticket | | | ot aiready list? | | | | | |
| | ✓ No | | | | | | | | |
| | Yes. Give specific | | | | | | | | |
| | information | | | | | | | | |
| | | | | | | | | ſ | |
| 54. A | dd the dollar value of a | Il of your entrie | s from Part | 7. Write that numb | ber her | e | | .▶ | |
| | | | | | | | | l | |
| | | | | | | | | | |
| Part | 8: List the Totals | of Each Par | t of this F | orm | | | | | |
| 55. I | Part 1: Total real estate, | line 2 | | | | | > | | |
| 56. | part 2 total vehicles, line | e 5 | | \$8 | 3150.00 | | | | |
| 57. P | art 3: Total personal ar | nd household it | tems, line 15 | | 3325.00 | | | | |
| 58. P | Part 4: Total financial as | sets, line 36 | | <u></u> | 15000.00 | | | | |
| 59. I | Part 5: Total business-r | elated property | , line 45 | <u> </u> | | <u>~</u> | | | |
| 60. I | Part 6: Total farm- and | fishing-related | property, lin | e 52 | | | | | |
| 61. I | Part 7: Total other prop | erty not listed, | line 54 | _ | | | | | |
| 62. | Total personal property | Add lines 56 th | rough 61 | | 26475.0 | | | | + \$26475.00 |
| | | | | Ψ2 | -5 17 0.00 | <u>~</u> | Copy personal property to | otal > | . 420110.00 |
| 62.4 | otal of all proporty on S | Pohodula A/D / | Add line FF : | lino 62 | | | | | \$26475.00 |

Debtor 1 Marie Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 (1/6)

| Part 3: Describe | our Personal and Household Items | |
|--|--|--|
| Do you own or ha | ave any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 11.2. Clothes | | |
| No✓ Yes. Describe | Fur Coat | \$1500.00 |
| | | <u>v</u> |

| Fill ir | n this inform | Case 16-15627 ation to identify your case: | Doc 1 | Filed 05/ | 06/16 | Entered | 05/06 | /16 18:1 | 7:32 | Desc Ma | in |
|-------------------------------------|---|--|--|---|--|--|---|--|--|--|---|
| Debt | | Marie | | | Randle | e | | | | | |
| | | First Name | Middle | Name | Last N | | | | | | |
| Debt (Spo | | First Name | Middle | Name | Last N | lame | | | | | |
| | | inkruptcy Court for the: | Northern | | istrict of III | | | | | | |
| | | initiapity Countries line. | Northern | | | State) | | | | | |
| | e number own) | , | | | | | | | | | |
| Off | ficial F | Form 106C | | | | | | | | | Check if this is a amended filing |
| Scl | hedul | C: The Prop | erty You | u Claim | as Ex | cempt | | | | | 12/1 |
| s to exen ece exen orop | state a s npted up ive certa nption of perty is d 1: Ident Which set | n of property you claused if the Amount of art in benefits, and taxinoon of fair marked etermined to exceed if the Property You of exemptions are you declaiming state and federal etermined texemptice. | nt as exempting applicable exempt retine value under that amour Claim as Explaining? Checknonbankruptcy of | Alternative estatutory rement fund ralaw that ht, your exempt | ely, you limit. So ds—may limits th mption v | may claim to me exempt to be unlimited the exemption would be limited to be something with the course is filing with the course is filled with the c | the full tions— ed in de on to a mited to | fair marke such as th ollar amou particular | et value ose for nt. Hov dollar a | of the prope health aids vever, if you amount and | perty being s, rights to u claim an the value of the |
| 2. | _ | operty you list on Sched | | | mpt, fill in | the informatio | on below | | | | |
| | | ription of the property a lle A/B that lists this pro | perty the po own | rtion you ne value from | | of the exempt | - | | Spec | ific laws that a | llow exemption |
| | Brief | | | | _ | | | | | 735 ILCS 5 | /12-1001(a) |
| | description | Used Clothing | \$4 | 100.00 | ✓ | \$4 | 400.00 | | _ | | |
| | Line from Schedule A | /B: <u>11</u> | | | | % of fair market vicable statutory | | to any | | | |
| | Brief | | 0.0 | 200.00 | | | | | | 735 ILCS 5 | /12-1001(b) |
| | description Line from | Used Furniture | | 00.00 | <u></u> | · | 600.00 | | _ | | |
| | Schedule A | /B: <u>06</u> | | | | % of fair market vicable statutory | | to any | | | |
| 3. | (Subject to | aiming a homestead exer adjustment on 4/01/19 and id you acquire the property | every 3 years af | ter that for case | s filed on oi | | · | , | | | |

☐ No

 Doc 1
 Filed 05/06/16
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 Desc Main

 Middle Name
 Docume 11 me
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 Debtor 1 Marie Case 16-15627
First Name

| t 2: Addition | nal Page | | 3 | |
|---|--|------------------------------------|--|--|
| • | ion of the property and line A/B that lists this property | Specific laws that allow exemption | | |
| Brief description: Line from Schedule A/B: | 2 Flatscreen TVs | \$800.00 | \$800.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Line from Schedule A/B: | Fur Coat | \$1,500.00 | \$1,500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a); 735 ILCS 5/12-1001(b) |
| Brief description: Line from Schedule A/B: | Misc Costume Jewlery 12 | \$25.00 | \$25.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Line from Schedule A/B: | Workman's Comp Suit against MAC one | \$15,000.00 | \$15,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(h)(4) |

| | | Case 16 | 15627 | Doc 1 Filed | OE/06/16 | Entered 05/06 | /16 10:17:22 | Dogo Main | |
|------------------------|---|--|--|--|---|---|--|------------------------------|-----------------------|
| Fill in | this informa | ation to identify | | DOC FIEO | U5/Ub/Tb | | /10 18.17.32 | Desc Main | |
| Debto | or 1 | Marie | | | Randle | ; | | | |
| Debto | or 2 | First Name | | Middle Name | Last Na | ame | | | |
| | | First Name | | Middle Name | Last Na | ame | | | |
| United | d States Ba | nkruptcy Court | for the: No | orthern | District of Illin | nois | | | |
| Case (If kno | number wn) | | | | (S | tate) | | | |
| Offi | icial F | orm 10 | 6D | | | | | | eck if this is a |
| | | | | s Who Hav | ve Clain | ns Secured | by Prope | | 12/1: |
| 1. [Part 1 2. L | No. Ch ✓ Yes. Fi List A List all seculaim. If more | ditors have cla eck this box an Il in all of the int All Secured ured claims. If the than one created | aims secured and submit this for formation below Claims a creditor has a partition and a parti | by your property? orm to the court with you w. more than one secured ticular claim, list the oth | or other schedules claim, list the creer creditors in Pa | ase number (if knowns). You have nothing else dittor separately for each rt 2. As much as | to report on this form. | Column B Value of collateral | Column C Unsecured |
| Р | ossidie, iisi | . trie ciairris irra | aipriabelicai ori | der according to the cre | cuitor 5 riarrie. | | Do not deduct the value of collateral. | that supports this claim | portion If any |
| <u> </u> | reditor's Na | ACCEPTANC ime D SUITE 205 Stree | | Describe the propert Hyundai, Sonata Val As of the date you file | ue: \$8,150.00 | | \$4,783.00 | \$8,150.00 | \$0.00 |
| | Debtor Debtor Debtor At least another Check commu | 2 only 1 and Debtor 2 one of the debt if this claim re | only ors and elates to a | car loan) Statutory lien (suc Judgment lien from Other (including a | u made (such as i ch as tax lien, med m a lawsuit i right to offset) | mortgage or secured chanic's lien) | | | |
| L | | vas incurred | | Last 4 digits of acco | | | \$4 783 00 | | |

here:

| Fill in | this informa | Case 16-1562 ation to identify your case | | 05/06/16 | Entered 05 | <u>/0</u> 6/16 18:17:32 | Desc | Main | |
|--|---|---|---|--|---|--|---|--|---|
| Debt | or 1 | Marie First Name | Middle Name | Randle Last Na | | | | | |
| Debte (Spot | or 2 | First Name | Middle Name | Last Na | | | | | |
| | | nkruptcy Court for the: | Northern | District of Illin | nois ate) | | | | |
| (If kno | , | 4005/5 | | | | | □ Chor | ok if this is an | amended filing |
| | | orm 106E/F le E/F: Cre | ditors Who | Have Ur | secure | d Claims | ШСпес | ж II и IIS IS ан | 12/15 |
| party t 106A/l are lis the bo | to any exect B) and on S ted in Sche exes on the | cutory contracts or une Schedule G: Executory edule D: Creditors Whe left. Attach the Contin | ole. Use Part 1 for creditors expired leases that could reverted leases of Contracts and Unexpired of Hold Claims Secured by nuation Page to this page. TY Unsecured Claims | esult in a claim. <i>I</i> I Leases (Official <i>I Property</i> . If mor | Also list executor Form 106G). Do re space is neede | y contracts on <i>Schedul</i> not include any creditor d, copy the Part you ne | e A/B: Prop rs with parti ed, fill it out | erty (Officia ally secured , number th | I Form I claims that e entries in |
| 1. | | ditors have priority una to Part 2. | secured claims against yo | ou? | | | | | |
| | identify wha possible, list Part 1. If mo | t type of claim it is. If a cla t the claims in alphabetic ore than one creditor hole | I claims. If a creditor has mo aim has both priority and nor cal order according to the cre ds a particular claim, list the claim, see the instructions for | npriority amounts, I editor's name. If yo other creditors in | ist that claim here a u have more than Part 3. | and show both priority and | Inonpriority a | amounts. As r | much as |
| | | | | | | | Total claim | Priority amount | Nonpriority amount |
| | | | | | | | | | |

Doc 1 Filed 05/06/16 Entered 05/06/16 /18/17:32 Desc Main Marie Case 16-15627 Debtor 1 Document Page 25 of 70 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 AFNI, INC \$279.00 Last 4 digits of account number 2734 Nonpriority Creditor's Name PO BOX 3427 When was the debt incurred? 3/1/2016 Street Number As of the date you file, the claim is: Check all that apply. Contingent **BLOOMINGTON** Illinois 61702 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL ✓ Is the claim subject to offset? Other. Specify CREDITOR: DISH NETWORK **✓** No Yes 4.2 ASHRO \$237.00 3901 Last 4 digits of account number Nonpriority Creditor's Name 1515 S 21ST ST When was the debt incurred? 10/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent 52732 CLINTON Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify CreditCard **✓** No Yes 4.3 CACH LLC \$183.00 Last 4 digits of account number 2059 Nonpriority Creditor's Name 370 17TH ST STE 5000 When was the debt incurred? 12/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent DENVER Colorado 80202 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Collection; Collecting for ORIGINAL Is the claim subject to offset?

✓ No Yes Other. Specify CREDITOR: SPRINGLEAF FINANCIAL

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First Name Middle Name Document Page 26 of 70

Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning w | rith 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|--|-------------|
| 4.4 | CAPITAL ONE BANK USA N Nonpriority Creditor's Name | Last 4 digits of account number | \$298.00 |
| | PO BOX 85520 | When was the debt incurred? 2/1/2016 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. Contingent | |
| | RICHMOND Virginia 23285 | Unliquidated | |
| | City State Zip Code | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify CreditCard | |
| | ✓ No | | |
| | ☐ Yes | | |
| 4.5 | ComEd Nonpriority Creditor's Name | Last 4 digits of account number | \$279.00 |
| | 3 Lincoln Center | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Oakbrook Terrace Illinois 60181 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Bill | |
| | Is the claim subject to offset? ✓ No | ✓ Other. Specify Bill | |
| | Yes | | |
| 46 | COMENITY BANK/DRESSBRN | | P047.00 |
| 4.0 | Nonpriority Creditor's Name | Last 4 digits of account number | \$247.00 |
| | PO Box 182273 Number Street | When was the debt incurred? 12/1/2015 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Columbus Ohio 43218 | Contingent | |
| | ColumbusOhio43218CityStateZip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| | Check if this claim relates to a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify CreditCard | |
| | No | - Citational | |
| | □ Vos | | |

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First Name Middle Name Docume Name Page 27 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page Debtor 1 Marie Case 16-15627 Doc 1
First Name Middle Name

| | After listing and anti-second this page and the second the second to the | with A.F. fallowed by A.C. and an fauth | Tatal alaim | | | |
|-----|--|--|-------------|--|--|--|
| , , | After listing any entries on this page, number them beginning w | | Total claim | | | |
| 4.7 | CREDIT ONE BANK NA Nonpriority Creditor's Name | Last 4 digits of account number | \$400.00 | | | |
| | PO BOX 98875 | When was the debt incurred? 8/1/2015 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | | | | | |
| | LAS VEGAS Nevada 89193 | Contingent | | | | |
| | City State Zip Code | Unliquidated | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| | <u> </u> | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | | | | |
| | At least one of the debtors and another | you did not report as priority claims | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Is the claim subject to offset? | ✓ Other. Specify CreditCard | | | | |
| | <u>✓</u> No | | | | | |
| | Yes | | | | | |
| 4.8 | Family Mobile | Last 4 digits of account number | \$150.00 | | | |
| | Nonpriority Creditor's Name Po Box 629026 | When was the debt incurred? | | | | |
| | Number Street | When was the dept incurred: | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | El Dorado Hls California 95762 | Contingent | | | | |
| | City State Zip Code | Unliquidated | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | | | | |
| | At least one of the debtors and another | you did not report as priority claims | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Is the claim subject to offset? | Other. Specify Phone bill | | | | |
| | ✓ No | _ | | | | |
| | Yes | | | | | |
| 4.9 | FST PREMIER | | \$1,092.00 | | | |
| | Nonpriority Creditor's Name | — Last 4 digits of account number | Ψ.,σσ=.σσ | | | |
| | 3820 N LOUISE AVE Number Street | When was the debt incurred? 9/1/2012 | | | | |
| | Trained Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | 0.0000/54110 | Contingent | | | | |
| | SIOUX FALLS South Dakota 57107 City State Zip Code | Unliquidated | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | | | | | |
| | Is the claim subject to offset? | ✓ Other. Specify CreditCard | | | | |
| | ▼ No | | | | | |
| | ☐ Yes | | | | | |

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First Name Middle Name Docume Page 28 of 70

Your NONPRIORITY Unsecured Claims - Continuation Page Debtor 1 Marie Case 16-15627
First Name

| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|------|--|--|-------------|
| 4.10 | Holy Cross Hospital Nonpriority Creditor's Name | Last 4 digits of account number | \$900.00 |
| | 2701 W 68th St | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. Contingent | |
| | ChicagoIllinois60629CityStateZip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill | |
| | Is the claim subject to offset? | ✓ Other. SpecifyMedical Bill | |
| | Yes | | |
| 4.11 | JEFFERSON CAPITAL SYST | | \$494.00 |
| 4.11 | Nonpriority Creditor's Name | Last 4 digits of account number 8003 | φ494.00 |
| | 16 MCLELAND RD Number Street | When was the debt incurred? 7/1/2014 | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | SAINT CLOUD Minnesota 56303 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify 001 UnknownLoanType | |
| | No | | |
| | Yes | | |
| 4.12 | PEOPLES ENGY Nonpriority Creditor's Name | — Last 4 digits of account number 6437 | \$103.00 |
| | 200 EAST RANDOLPH | When was the debt incurred? 7/1/2012 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | CHICAGO Illinois 60601 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| | 片 | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt Is the claim subject to offset? | ✓ Other. Specify InstallmentLoan | |
| | No | V Salot. Spoony mistain to tite dati | |
| | Yes | | |

Debtor 1 Marie Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 18:417:32 Desc Main
First Name Docume 12: Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|------|---|---|-------------|
| 4.13 | PEOPLES ENGY Nonpriority Creditor's Name 200 EAST RANDOLPH Number Street | Last 4 digits of account number 7339 When was the debt incurred? 8/1/2015 As of the date you file, the claim is: Check all that apply. | \$2.00 |
| | CHICAGO Illinois 60601 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify InstallmentLoan | |
| | SW CRDT SYS Nonpriority Creditor's Name 2629 DICKERSON PK Number Street CARROLLTON Texas 75007 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | Last 4 digits of account number 0716 When was the debt incurred? 7/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CREDITOR: 11 T MOBILE | \$701.00 |
| | University of Chicago Medicine Nonpriority Creditor's Name 15965 Collections Center Dr Number Street Chicago Illinois 60693 | Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent | \$200.00 |
| | City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Medical Bill | |

Debtor 1 Marie Case 16-15627
First Name

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 Middle Name
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 Part 4: Add the Amounts for Each Type of Unsecured Claim

| 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. | | | | | | | | | |
|---|---|---|---------------|--------------|--|--|--|--|--|
| | | | | Total claims | | | | | |
| Total claims from Part 1 | 6a. | Domestic support obligations. | 6a. | \$0.00 | | | | | |
| | 6b | Taxes and certain other debts you owe the government | 6b. | \$0.00 | | | | | |
| | 6c. Claims for death or personal injury while you were intoxicate | | ed 6c. \$0.00 | | | | | | |
| | 6d | I. Other. Add all other priority unsecured claims. Write that amount here. | | \$0.00 | | | | | |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$0.00 | | | | | |
| | | | | Total claims | | | | | |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 | | | | | |
| | 6g | 6g. Obligations arising out of a separation agreement or divorce 6 that you did not report as priority claims | 6g. | \$0.00 | | | | | |
| | 6h | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | | | | |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$5,565.00 | | | | | |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$5,565.00 | | | | | |

| Fill in this ir | Case 16-15627 Iformation to identify your case | | 5/06/16 | Entered 05 | /06/16 18:17:32 | Desc Main | | | |
|--------------------------|--|----------------------------------|-----------------------|---------------|---------------------------------------|--|--|--|--|
| Debtor 1 | Marie First Name | Middle Name | Randle Last Na | | | | | | |
| Debtor 2 (Spouse, if | filing) First Name | Middle Name | Last Na | ame | | | | | |
| United State | es Bankruptcy Court for the: | Northern | District of Illin (St | nois tate) | | | | | |
| Officia | al Form 106G | | | | | Check if this is ar amended filing | | | |
| Sched | Schedule G: Executory Contracts and Unexpired Leases | | | | | | | | |
| space is ne | | | | | | ing correct information. If more onal pages, write your name and | | | |
| No. | u have any executory of Check this box and file this form. Fill in all of the information be | m with the court with your other | er schedules. Yo | · · | • | /B). | | | |
| | parately each person or com lease, cell phone). See the in | | | | | | | | |
| Pe | rson or company with whom | you have the contract or le | ease | | State what the contrac | t or lease is for | | | |
| 2.1 <u>Berna</u> Name | adette Kabir e | | | - | Other, Other, Residential lease | | | | |
| Num | ber Street | | | _ | | | | | |

Zip Code

State

City

| | | Case 16-1562 | 7 Doc 1 Filad (|)5/06/16 Entered | NE/NE/16 10:17:22 | Desc Main |
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| Fill | in this inform | ation to identify your case | | 13/00/10 Filleren | 05/0/10 10.17.32 | Desc Main |
| De | btor 1 | Marie | | Randle | | |
| _ | | First Name | Middle Name | Last Name | | |
| - | btor 2 oouse, if filing | First Name | Middle Name | Last Name | — | |
| Un | ited States Ba | ankruptcy Court for the: | Northern | District of Illinois | | |
| | se number (nown) | | | (State) | _ | |
| | | | | | | Check if this is an amended filing |
| O | fficial F | Form 106H | | | | |
| Sc | hedul | e H: Your Co | debtors | | | 12/1 |
| in th | ne boxes on ry question. | the left. Attach the Add | litional Page to this page. C | | Pages, write your name and c | ge, fill it out, and number the entries case number (if known). Answer |
| 2. | Within the Louisiana, N No. G Yes. D | levada, New Mexico, Pue o to line 3. iid your spouse, former sp lo | erto Rico, Texas, Washington, bouse, or legal equivalent live | and Wisconsin.) | | ries include Arizona, California, Idaho, nat person. |
| | | Name of your spouse, for | ormer spouse, or legal equival | ent | _ | |
| | | Number Street | | | _ | |
| | | City | State | Zip Code | _ | |
| 3. | as a codeb | tor only if that person i | s a guarantor or cosigner. | | e creditor on Schedule D (Of | t the person shown in line 2 again fficial Form 106D), <i>Schedule E/F</i> olumn 2. |
| | Column 1: | Your codebtor | | | Column 2: The creditor to | whom you owe the debt |

Check all schedules that apply:

| Fill in thi | s information to identify | your case: | | 6/16 1 | 8:17:32 Desc M | ain |
|-------------------------|--|--|---|--------------------------------|-----------------------------------|----------------------------|
| 5.1. 4 | | D00 | • | 3 3 01 7 0 | | |
| Debtor 1 | Marie First Name | Middle Name | Randle Last Name | | | |
| Dobtor 2 | FIISI Name | Middle Name | Last Name | | Check if this is: | |
| Debtor 2 (Spouse, if | filing) First Name | Middle Name | Last Name | | An amended filing | |
| (| ·······s/ I list Name | Middle Name | Lastiname | | = | g post-petition chapter 13 |
| | es Bankruptcy Court for the: | Northern | District of Illinois (State) | | expenses as of the fol | |
| Case numb (If known) | per | | | | MM / DD / YYYY | - |
| Officia | al Form 1061 | | | | | |
| Sched | dule I: Your Inc | ome | | | | 12/15 |
| ages, w | | e. If more space is nee se number (if known). nt | Answer every qu | | | any additional |
| | Fill in your employment | | Debtor 1 | | Debtor 2 | |
| | information. | Employment status | | | | |
| | you have more than one o, | Employment status | ✓ Employed✓ Not Employed | | Employed Not Employed | |
| | attach a separate page with information about additional | Occupation | | | _ | |
| | employers. | Employer's name | | | | |
| | Include part time, seasonal, | | | | | |
| | or self-employed work. | Employer's address | Number Street | | Number Street | |
| | Occupation may include | | | | _ | |
| | student | | | | _ | |
| | or homemaker, if it applies. | | - | | | |
| | | | City | State Zip Code | City S | tate Zip Code |
| | | How long employed there | ? | | | |
| Part 2: | Give Details About I | Monthly Income | | | | |
| | | • | | | | |
| Estimate are separa | | date you file this form. If you | ı have nothing to report | for any line, write \$0 in the | e space. Include your non-fili | ng spouse unless you |
| | | re than one employer, combine | e the information for all | employers for that person o | on the lines below. If you nee | d more space, attach |
| a separate | e sheet to this form. | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| 2 liet | monthly gross wages salar | y, and commissions (before | all payroll 2. | ¢4 500 04 | non-ming spouse | - |
| | | lculate what the monthly wage | | \$1,523.34 | | _ |
| 3. Esti | mate and list monthly overt | ime pay. | 3. | + \$0.00 | | _ |

4. Calculate gross income. Add line 2 + line 3.

\$1,523.34

Filed 05/96/16 Entered @5406/46 48:17:32 Desc Main Case 16-15627 Doc 1 Debtor 1 Marie Middle Name Documentame Page 34 of 70 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here \$1,523.34 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$226.20 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$42.25 \$268.45 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,254.89 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$733.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income \$16.00 8f. 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$749.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$2,003.89 \$2,003.89 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$2,003.89 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

Debtor 1 Marie Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 18:17:32 Desc Main
First Name Middle Name Documentame Page 35 of 70

Part 2: Give Details About Monthly Income

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---------------------------------------|--------------|-----------------------------------|
| 5h.Other payroll deductions. Specify: | | |
| 1. Parking | \$24.92 | |
| 2. Uniform Costs | \$17.33 | |

| | Case 16-1562 | 27 Doc 1 Filed 05 | 3/06/16 Entered (| <u>)5/0</u> 6/16 18:17:32 | Desc Main | |
|--|---|---|---|-------------------------------|----------------------------------|------------|
| Fill in this inform | ation to identify your ca | | <u> </u> | | | |
| Debtor 1 | Marie | | Randle | | | |
| | First Name | Middle Name | Last Name | _ | | |
| Debtor 2 | | | | Check if this is: | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fili | ng | |
| United States Ba | ankruptcy Court for the: | Northern | District of Illinois | | howing post-petition ch | hapter 13 |
| Case number | | | (State) | expenses as of | the following date: | |
| (If known) | | | | | | |
| >((; ;) E | 4001 | | | | | |
| <u> Jiticial F</u> | orm 106J | | | | | |
| Schedule | e J: Your Ex | xpenses | | | | 12/1 |
| nformation. If m | ore space is needed, ver every question. ribe Your Househ | ible. If two married people are attach another sheet to this fo | | | | |
| | | | | | | |
| ✓ No. Go t | | | | | | |
| Yes. Do | es Debtor 2 live in a s | eparate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 must fil | e Official Forms 106J-2, Expense | es for Separate Household of L | Debtor 2. | | |
| 2. Do you have | dependents? | No | | | | |
| Do not list De Debtor 2. | | Yes. Fill out this information for each dependent | Dependent's relationship Debtor 1 or Debtor 2 Child | p to Dependent's age 28 years | Does dependen with you? No. Yes. | nt live |
| 3. Do your expe | | M. | | | | |
| expenses of than | people other | No | | | | |
| yourself and | your \(\squar \) | Yes | | | | |
| dependents | ? | | | | | |
| Part 2: Estim | nate Your Ongoing | Monthly Expenses | | | | |
| Estimate your expenses as of applicable date | expenses as of your b f a date after the bank s. | pankruptcy filing date unless your ruptcy is filed. If this is a supp | lemental Schedule J, check | | • | |
| | | cash government assistance it it on Schedule I: Your Income | | | Your | expenses |
| | r home ownership ex the ground or lot. 4. | penses for your residence. Incl | ude first mortgage payments a | and | 4. | \$1,050.00 |
| If not inclu | ded in line 4: | | | | | |
| 4a. Real est | ate taxes | | | | 4a | \$0.00 |
| 4b. Property | , homeowner's, or rente | er's insurance | | | 4b | \$23.00 |
| 4c. Home m | aintenance, repair, and | upkeep expenses | | | 4c. | \$0.00 |

\$0.00

4d.

4d. Homeowner's association or condominium dues

ebtor 1 Marie Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 @18417:32 Desc Main

Document Page 37 of 70 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$300.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$83.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$250.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$30.00 9. 10. Personal care products and services \$100.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$200.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$0.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c

\$0.00

\$0.00

20d

20e

20d. Maintenance, repair, and upkeep expenses 20d.

20e. Homeowner's association or condominium dues

| Debtor 1 | Marie Case 16-1562 | 7 Doc 1 | Filed 05/06/16 | Entered 05/06/16 (146 | Bผ่ น 7: <u>32 Desc M</u> | ain |
|-------------------|-----------------------------------|---------------------|-------------------------------|------------------------|----------------------------------|------------|
| | First Name | Middle Name | Documetnit ^{me} | Page 38 of 70 | | |
| 21. Other. | Specify: | | | - | 21 | \$0.00 |
| | | | | | | |
| | late your monthly expenses. | | | | | \$2,036.00 |
| 22a. A | dd lines 4 through 21. | | | | | \$0.00 |
| 22b. C | Copy line 22 (monthly expenses | for Debtor 2), if a | ny, from Official Form 106J | -2 | | \$2,036.00 |
| 22c. A | dd line 22a and 22b. The result | is your monthly e | expenses. | | 22. | |
| 23. Calcul | late your monthly net income |). | | | | |
| 23a. C | Copy line 12 (your combined mor | nthly income) from | m Schedule I. | | 23a | \$2,003.89 |
| 23b. C | copy your monthly expenses from | n line 22 above. | | | 23b | \$2,036.00 |
| | ubtract your monthly expenses f | , , | / income. | | | (\$32.11) |
| ٦ | The result is your monthly net in | come. | | | 23c | |
| 24. Do yo | ou expect an increase or decr | ease in your ex | penses within the year af | er you file this form? | | |
| For e | xample, do you expect to finish p | naving for vour ca | ar loan within the year or do | vou expect vour | | |
| | gage payment to increase or de | , , , | • | | | |
| √ N | No. | | | | | |
| | 'es | | | | | |
| Ш' | es | | | | | |
| | Explain here: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

page 3

| | | 0 10 1500 | 7 D 4 Eil-d | NE 10 C 14 C | d 05/00/40 40:47:00 | Daga Main |
|----------|----------------------------|--|-----------------------------|------------------------------------|---|---------------------------------------|
| Fill | in this inform | Case 16-1562 ation to identify your case | 7 Doc 1 Filed (| 15/Ub/16 Ente | red 05/06/16 18:17:32 | Desc Main |
| Del | otor 1 | Marie | | Randle | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 ouse, if filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Ba | ankruptcy Court for the: | Northern | District of Illinois(State) | | |
| | se number nown) | | | (State) | | |
| Of | ficial F | orm 106De | <u>c</u> | | | Check if this is a amended filing |
| De | clarat | ion About a | n Individual De | ebtor's Sche | dules | 12/1: |
| 1519 | , and 3571. | Below | | | | ars, or both. 18 U.S.C. §§ 152, 1341, |
| | Did you pa | y or agree to pay some | one who is NOT an attorne | y to help you fill out ba | inkruptcy forms? | |
| | ✓ No | | | | | |
| | Yes. N | ame of person | | Attach Bankrup Signature (Offic | otcy Petition Preparer's Notice, Decla cial Form 119). | ration, and |
| | • | alty of perjury, I declare | e that I have read the summ | ary and schedules file | d with this declaration and | |
| ~ | /s/ Marie R | | | × | | |
| | Signature of | | | | ature of Debtor 2 | |
| | Date <u>5/6/20</u> | <u>116</u> DD/YYYY | | Date | MM/DD/YYYY | |

| | n this inform | Case 16-1562 nation to identify your case | 7 Doc 1 | Filed 05/06/16 | Entered 05/06/16 18:1 | 7:32 Desc Main | |
|------|-------------------|--|-----------------------|-----------------------------|---|--|--------|
| Deb | | Marie | | Randle | | | |
| | tor 2 | First Name | Middle N | lame Last Nan | ne | | |
| | | First Name | Middle N | | | | |
| | | ankruptcy Court for the: | Northern | District of Illino (Sta | | | |
| | e number lown) | | | | | _ | |
| Off | ficial F | Form 107 | | | | Check if thi amended fi | |
| Sta | ateme | nt of Financi | al Affairs | for Individua | Is Filing for Bank | ruptcy | 12/1 |
| | | | | | | r supplying correct information. If more number (if known). Answer every que | |
| Part | | • | | and Where You Live | | , maniber (ii miowii). Anoner every que | 551101 |
| | | | | and Where Tou Live | ed Belore | | |
| 1. | _ | your current marital sta | itus ? | | | | |
| | | married | | | | | |
| 2. | During t | he last 3 years, have you | ı lived anywhere o | ther than where you live I | now? | | |
| | ✓ No | | | | | | |
| | Yes. | . List all of the places you li | ved in the last 3 yea | rs. Do not include where yo | u live now. | | |
| | | 44 | | Dates Debtor 1 lived | Debtor 2: | Datas Dalitas Olivas | |
| | Deb | otor 1: | | there | D05(0) 2. | Dates Debtor 2 lived there | t |
| | Deb | otor 1: | | | Same as Debtor 1 | | |
| | | | | | Same as Debtor 1 | there | |
| | | nber Street | | there | | there Same as Debtor 1 | |
| | Num | nber Street | 7in Codo | there | Same as Debtor 1 Number Street | there Same as Debtor 1 From To | |
| | | nber Street | Zip Code | there | Same as Debtor 1 | there Same as Debtor 1 From | 1 |
| | Num | nber Street State | Zip Code | there From To | Same as Debtor 1 Number Street City State Same as Debtor 1 | there Same as Debtor 1 From To Zip Code Same as Debtor 1 | 1 |
| | Num | nber Street | Zip Code | there | Same as Debtor 1 Number Street City State | there Same as Debtor 1 From To Zip Code | 1 |
| | Num | nber Street State | Zip Code | there | Same as Debtor 1 Number Street City State Same as Debtor 1 | there Same as Debtor 1 From To Zip Code Same as Debtor 1 | 1 |

Debtor 1 Marie Case 16-15627 First Name
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 Doc 1

| Pai | t 2: Explain the Sources of Your Inc | ome | | | |
|-----|---|---|---|--|--|
| 4. | Did you have any income from employment Fill in the total amount of income you received fr activities. If you are filing a joint case and you have No Yes. Fill in the details. | rom all jobs and all businesses | including part-time | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$5384.44 | Wages, commissions, bonuses, tips Operating a business | |
| | For last calendar year: (January 1 to December 31, 2015) YYYY | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$19523.69 | Wages, commissions, bonuses, tips Operating a business | |
| | For the calendar year before that: (January 1 to December 31, 2014) YYYYY | Wages, commissions, bonuses, tips Operating a business | \$10000.00 | Wages, commissions, bonuses, tips Operating a business | |
| 5. | Did you receive any other income during this Include income regardless of whether that income benefit payments; pensions; rental income; intere and you have income that you received together, List each source and the gross income from each No Yes. Fill in the details. | e is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1. | income are alimony; child so from lawsuits; royalties; and | gambling and lottery winnings. | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | SSI | \$3,665.00 | | |
| | From January 1 of current year until the date you filed for bankruptcy: | LINK | \$80.00 | | |
| | | SSI | \$9.706.00 | | |
| | For last calendar year: (January 1 to December 31, | LINk | \$8,796.00 \$192.00 | | |
| | For the calendar year before that: (January 1 to December 31,2014) | SSI | \$8,796.00 | | |
| | YYYY | LINK | \$2,400.00 | | |
| | | | | | |

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| Pa | rt 3: | List Ce | rtain Pa | yments Y | ou Made Before | You Filed for Ban | kruptcy | | | | | |
|----|---|-------------------|-------------|---------------|-------------------------|----------------------------|---|------------------------------|--|--|--|--|
| 6. | Are | either Deb | otor 1's o | Debtor 2's | debts primarily con | sumer debts? | | | | | | |
| | | | | | tor 2 has primarily o | onsumer debts. Consu | umer debts are defined in 11 | U.S.C. § 101(8) as "incurred | by an individual primarily | | | |
| | | Durin | g the 90 d | lays before y | ou filed for bankruptcy | , did you pay any creditor | a total of \$6,425* or more? | | | | | |
| | | П | No. Go to | line 7. | | | | | | | | |
| | | | total | amount you | paid that creditor. Do | not include payments fo | nore in one or more payment r domestic support obligation attorney for this bankruptcy ca | s, such as | | | | |
| | * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | | | | | | |
| | Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. | | | | | | | | | | | |
| | | Durin | g the 90 d | lays before y | ou filed for bankruptcy | , did you pay any creditor | a total of \$600 or more? | | | | | |
| | | \ | No. Go to | line 7. | | | | | | | | |
| | | = | Yes. List I | below each o | not include payments | | e and the total amount you pa ligations, such as child suppo nkruptcy case. | | | | | |
| | | | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for | | | |
| | | Creditor's Number | | Chata | 7'n Code | | | | Mortgage Car Credit card Loan repayment Suppliers or vendors | | | |
| | | City | | State | Zip Code | | | | Other | | | |
| | | Creditor's | s Name | | | | | | Mortgage | | | |
| | | Number | Street | | | | | | Car Credit card | | | |
| | | - Tarribor | Olicot | | | | | | Loan repayment | | | |
| | | | | | | | | | Suppliers or | | | |
| | | City | | State | Zip Code | | | | vendors Other | | | |
| | | Creditor's | s Name | | | | | | ☐ Mortgage | | | |
| | | Number | Street | | | | | | Credit card | | | |
| | | | | | | | | | Loan repayment | | | |
| | | City | | State | Zip Code | | | | Suppliers or vendors | | | |
| | | Oity | | Siale | Zip Code | | | | Other | | | |

Doc 1 Filed 05/406/16 Entered 05/06/16 168/17:32 Desc Main Debtor 1 Document Page 43 of 70 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

| 9. | such matters, includ | filed for bankruptcy, wing personal injury cases | | | | | | stody mod | difications, and contract |
|----|---|--|----------|------------------------------------|---------------------|--------|----------|------------------|---------------------------|
| | lo es. Fill in the details. | | | | | | | | |
| | | | Nature o | of the case | Court or age | ncy | | Status | s of the case |
| | Case title | | | | | | | P | ending |
| | | | | | Court Name | | | _ _ _ 0 | n appeal |
| | Case number | | | | Number Stree | et . | | - 🔲 c | oncluded |
| | | | | | City | State | Zip Code | = | |
| | Case title | | | | | | | Пр | ending |
| | | | | | Court Name | | | - = | n appeal |
| | Case number | | | | | | | | oncluded |
| | | | | | Number Stree | t | | П | onolada |
| | | | | | City | State | Zip Code | _ | |
| | Yes. Fill in the inform Creditor's Name Number Street | ation below. | | Describe the proper | ned | | Date | | Value of the property |
| | | | | Property was rep | | | | | |
| | | | | Property was fore Property was gar | | | | | |
| | City | State Zip C | ode | Property was atta | | evied. | | | |
| | Oity | Otate Zip C | | Describe the proper | | | Date | | Value of the property |
| | | | | | | | | | |
| | Creditor's Name | | | | | | | | |
| | Number Street | | | Explain what happe | ned | | | | |
| | | | | Property was rep | ossessed. | | | | |
| | | | | Property was fore | eclosed. | | | | |
| | | | | Property was gar | | | | | |
| | City | State Zip C | ode | Property was atta | iched, seized, or l | evied. | | | |

| Deb | tor 1 | | <u>d 05/06/16 Entered</u> 05/06/16 /1.8:117: ocument Page 45 of 70 | :32 Desc | Main |
|------|-----------|---|---|--------------------------|-------------------------|
| 11. | | nin 90 days before you filed for bankruptcy, did any ounts or refuse to make a payment because you owe No | creditor, including a bank or financial institution, set of | ff any amounts fr | om your |
| | | Yes. Fill in the details. | | | |
| | _ | | Describe the action the creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | |
| | | Number Street | | | |
| | | | Last 4 digits of account number: XXXX- | | |
| | | City State Zip Code | | | |
| 12. | | nin 1 year before you filed for bankruptcy, was any o iver, a custodian, or another official? | f your property in the possession of an assignee for th | e benefit of credi | tors, a court-appointed |
| | _ | No | | | |
| Part | □ 5: 1 | Yes List Certain Gifts and Contributions | | | |
| | | | give any gifts with a total value of more than \$600 per | noroon? | |
| 13. | VVI | No | give any girts with a total value of more than \$000 per | person? | |
| | | Yes. Fill in the details for each gift. | | | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the Gift | | | |
| | | | | | |
| | | Number Street | | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |
| | | Person to Whom You Gave the Gift | | | |
| | | Number Street | | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |
| | | | | | |

| | | FIRST Name | Middle Name D | ocument Page 46 of 70 | | |
|------|----------------|--|------------------------------|---|-----------------------------------|------------------------|
| 14. | With | nin 2 years before you f | | give any gifts or contributions with a total value of mor | e than \$600 to an | y charity? |
| | ✓ | No Yes. Fill in the details for | r each gift or contribution. | | | |
| | _ | Gifts with a total value per person | - | Describe the gifts | Dates you gave the gifts | Value |
| | | Charity's Name | | - | | |
| | | | | - | | |
| | | Number Street | | _ | | |
| Dont | . C. | City St | ate Zip Code | | | |
| Part | With | | | ou filed for bankruptcy, did you lose anything because | of theft, fire, othe | r disaster, or |
| | <u></u> | No Yes. Fill in the details. | | | | |
| | _ | Describe the property how the loss occurred | | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | Date of your loss | Value of property lost |
| | | | | insurance claims on line 33 of Schedule A/B: Property. | | |
| | | | | | | |
| 16. | seek Includ | ing bankruptcy or prep | paring a bankruptcy petition | or anyone else acting on your behalf pay or transfer any p? ? lit counseling agencies for services required in your bankrupto | | e you consulted about |
| | | | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm Person Who Was Paid 20 South Clark Street 28 Number Street | 8th Floor | Attorney's Fee - 0.00 | 5/6/2016 | \$0.00 |
| | | - Ottool | | _ | | |
| | | | inois 60606 rate Zip Code | - | | |
| | | Email or website addres | s | - | | |
| | | Person Who Made the P | Payment, if Not You | - | 1 | |
| | | Person Who Was Paid | | - | | |
| | | Number Street | | - | | |
| | | City Sta | ate Zip Code | - | | |
| | | Email or website addres | s | - | | |
| | | Person Who Made the P | ayment, if Not You | | | |

Debtor 1 Marie Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 A& 17:32 Desc Main

| Deb | tor 1 | Marie Case 16-15627 First Name | Doc 1 Filed Middle Name Do | d 05/06/16 cumethtme | Entered 05/06 Page 47 of 70 | 6/11.66 (114.8 is 11.7) | : <u>32 Desc</u> | <u>Main</u> | |
|-----|-------------------------|---|--|----------------------------------|--------------------------------|-------------------------|-----------------------------------|-------------|------------------------|
| 17. | you | nin 1 year before you filed for ba deal with your creditors or to ma not include any payment or transfer | ake payments to you | r creditors? | ng on your behalf pay o | or transfer any p | property to anyor | ne who p | promised to help |
| | ✓ | No Yes. Fill in the details. | | Description and | d value of any property | transferred | Date payment | Amoui | nt of payment |
| | | | | | | | or transfer was made | | |
| | | Person Who Was Paid | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State | Zip Code | | | | | | |
| 18. | ordin Inclu trans | nin 2 years before you filed for be nary course of your business or de both outright transfers and transfers that you have already listed on No Yes. Fill in the details. | financial affairs? sfers made as security | | | | | - | |
| | Ц | Too. I iii iii die dotalle. | | Description and property transfe | | | property or paymebts paid in exch | | Date transfer was made |
| | | Person Who Received Transfer | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| | | Person Who Received Transfer | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| 19. | (The | nin 10 years before you filed for use are often called asset-protection | | transfer any prop | perty to a self-settled tru | ust or similar de | evice of which yo | u are a k | peneficiary? |
| | Ц | Yes. Fill in the details. | | Description an | d value of the property | transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |
| | | | | | | | | | |

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

Debtor 1 Marie Case 16-15627 First Name Filed 05/06/16 Entered 05/06/16 118:17:32 Desc Main Doc 1 Page 48 of 70 Documetht me

| 20. | or tr Inclu | ansferred? | money mark | et, or other financ | cial account | | | n your name, or for you | | |
|-----|----------------|---|----------------|---------------------|--------------|----------------------------|-----------------|--------------------------|---|---|
| | ✓ | No | | | | | | | | |
| | | Yes. Fill in the details | i. | | | | | | | |
| | | | | | Last 4 | 4 digits of account per | Type of instrun | account or nent | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | D | *.1 | | — xxxx | · <u>-</u> | Che | ecking | | |
| | | Person Who Was Pa | iid | | | | Sav | vings | <u> </u> | |
| | | Number Street | | | | | Mo | ney market | | |
| | | | | | | | Bro | kerage | | |
| | | | | | | | Oth | er | | |
| | | City | State | Zip Code | | | | | | |
| | | | | · | xxxx | | □ Ch | ecking | | |
| | | Person Who Was Pa | iid | | ^^^^ | - | = | rings | | |
| | | Number Street | | | <u>—</u> | | _ | ney market | | |
| | | Number Street | | | | | | kerage | | |
| | | - | | | | | Oth | · · | | |
| | | C:t | 01-1- | 7:- 01- | <u></u> | | _ | | | |
| | | City | State | Zip Code | | | | | | |
| 21. | valu | ou now have, or did ables? No Yes. Fill in the details | | ithin 1 year befo | ore you file | d for bankruptcy, a | ıny safe deposi | t box or other depositor | ry for securities, | cash, or other |
| | Ц | res. Fill III the details | | | Who else | had access to it? | | Describe the contents | s | Do you still have it? |
| | | | | | | | | | | П., |
| | | Name of Financial Ir | nstitution | | Name | | | | | ∐ No |
| | | Number Street | | | Number | Street | | | | Yes |
| | | - | | | City | State | Zip Code | | | |
| | | | | | Oily | Cidio | Zip Godo | | | |
| | | City | State | Zip Code | | | | | | |
| 22. | Have | e you stored proper | ty in a storaç | e unit or place | other than | your home within | 1 year before y | ou filed for bankruptcy | ? | |
| | V | No | | | | | | | | |
| | | Yes. Fill in the details | i. | | | | | | | |
| | | | | | Who else | had access to it? | | Describe the contents | s | Do you still |
| | | | | | | | | | | have it? |
| | | Name of Storage Fa | ocility | | Name | | | | | □ No |
| | | | <u></u> | | | | | | | Yes |
| | | Number Street | | | Number | Street | | | | _ |
| | | | | | City | State | Zip Code | | | |
| | | City | State | Zip Code | • | | • | | | |
| | | Oity C | Jidio | Zip Code | | | | | | |

| Where is the property? Owner's Name | Deb | | First Name Middle Name | Filed 05/0 Docume | ≝nt™ Paç | ntered | 16/11.6/11.8/117: <u>32 Desc Mair</u> | 1 |
|--|------|----------|---|--------------------------------------|---------------------------------------|--|--|-----------------|
| Where is the property? Owner's Name | Part | 9: | Identify Property You Hold or Contro | I for Some | one Else | | | |
| Ouncir's Name Number Street | 23. | _ | No | e else owns? I | nclude any pro | perty you borro | wed from, are storing for, or hold in true | st for someone. |
| Number Street | | _ | | Where is th | e property? | | Describe the contents | Value |
| City State Zip Code | | | Owner's Name | Number Stre | eet | | - | |
| City State Zip Code Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: - Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. - Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. - Flazardous material mans anything an environmental law eliense as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No No Yes. Fill in the details. Governmental unit Number Street Number Street | | | Number Street | | | | - | |
| Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: • Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. • Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. • Hazardous material politican means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, politicant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | City | State | Zip Code | - | |
| For the purpose of Part 10, the following definitions apply: ### Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. #### Sife means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. #### Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, polutiant, contaminant, or similar term. #### Report all notices, releases, and proceedings that you know about, regardless of when they occurred. ################################### | | | City State Zip Code | _ | | | | |
| ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. ■ Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. ■ Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ▼ No ▼ Yes. Fill in the details. ■ Environmental law, if you know it ■ Date of notice ■ City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? ▼ No ▼ Yes. Fill in the details. ■ Environmental law, if you know it ■ Date of notice ■ Environmental law, if you know it ■ Date of notice ■ Environmental law, if you know it ■ Date of notice ■ Street ■ Number Street ■ State Zip Code | Part | 10: | Give Details About Environmental In | nformation | | | | |
| hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Size means any location, facility, or properly as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Sevenmental unit Governmental unit Number Street City State Zip Code | For | the p | urpose of Part 10, the following definitions apply: | | | | | |
| or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Value | | ha in | azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clear | nto the air, land nup of these su | , soil, surface wa bstances, waste | ater, groundwater, es, or material. | , or other medium, | |
| toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | • | viiorimentariaw, | whether you now | own, operate, or utilize it | |
| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | · | | | aste, hazardous s | substance, | |
| No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice | Rep | oort al | I notices, releases, and proceedings that you know | <i>i</i> about, regardle | ess of when they | occurred. | | |
| Yes. Fill in the details. Governmental unit | 24. | Has | | may be liable o | or potentially lia | able under or in | violation of an environmental law? | |
| Name of site Number Street | | Ħ | | | | | | |
| Number Street City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Name of site Number Street Number Street City State Zip Code Environmental law, if you know it Date of notice Number Street City State Zip Code | | | | Governmen | ntal unit | | Environmental law, if you know it | Date of notice |
| City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? ✓ No | | | Name of site | Government | al unit | | - | |
| 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Finvironmental law, if you know it Name of site Number Street Number Street City State Zip Code | | | Number Street | Number Stre | eet | | - | |
| 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Name of site Number Street Number Street City State Zip Code Place of notice | | | | City | State | Zip Code | - | |
| No Yes. Fill in the details. Governmental unit Name of site Number Street Number Street City State Zip Code Date of notice | | | City State Zip Code | _ | | | | |
| Yes. Fill in the details. Governmental unit Name of site Number Street City State Zip Code Environmental law, if you know it Date of notice Date of notice | 25. | Hav | e you notified any governmental unit of any re | elease of hazaı | rdous material | ? | | |
| Name of site Number Street City State Zip Code Date of notice Date of notice | | ✓ | | | | | | |
| Number Street City State Zip Code | | _ | | Governmen | ntal unit | | Environmental law, if you know it | Date of notice |
| City State Zip Code | | | Name of site | Government | al unit | | - | |
| | | | Number Street | Number Stre | eet | | - | |
| City State Zip Code | | | | City | State | Zip Code | - | |
| | | | City State Zip Code | _ | | | | |

| Debto | or 1 | Marie Case 16-15627 First Name | | | <u>Entered</u> 05/06 Page 50 of 70 | ih 166 (148 is 17: <u>32</u> | Desc Main |
|------------|----------|---|-----------------------|----------------------------|---------------------------------------|------------------------------|---|
| 26. | Hav | e you been a party in any judio | cial or administrativ | e proceeding under | any environmental law | ? Include settlements | and orders. |
| ļ | ✓ | No | | | | | |
| | Ш | Yes. Fill in the details. | | Court or agency | | Nature of the case | Status of the |
| | | Case title | | | | | case |
| | | | | Court Name | | | Pending |
| | | | ·- | Number Street | | | On appeal |
| | | Case number | | Number Street | | | Concluded |
| | | _ | Ō | City State | e Zip Code | | |
| Part 1 | 11: | Give Details About Your | Business or Co | onnections to Ar | ny Business | | |
| 27. | With | nin 4 years before you filed for | bankruptcy, did yo | u own a business or | have any of the follow | ing connections to any | y business? |
| | | A sole proprietor or self-em | | | • | -time | |
| | | A member of a limited liabil A partner in a partnership | ity company (LLC) oi | imited liability partner | 'SNIP (LLP) | | |
| | | An officer, director, or mana | | | | | |
| | | An owner of at least 5% of t | | ecurities of a corporation | on | | |
| | | No. None of the above applies. G Yes. Check all that apply above a | | elow for each business | S. | | |
| • | | | | Describe the na | ture of the business | | entification number Do not al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | | ntant or bookkeeper | Dates busine | ss existed |
| | | City State | Zip Code | | · | From | То |
| | | | | | | | |
| | | | | Describe the na | ture of the business | | entification number Do not al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | | ntant or bookkeeper | Dates busine | ess existed |
| | | City State | Zip Code | | | From | To |
| | | , | · | | | | |
| | | | | Describe the na | ture of the business | | entification number Do not al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | Name of accoun | ntant or bookkeeper | Dates busine | ess existed |
| | | City State | Zip Code | | main of bookhooper | From | To |
| | | • | , | | | | |
| | | | | | | | |

| Debtor | | | | <u>red</u> | <u>Desc Main</u> |
|----------|--|-----------------------|----------------------------|--|--------------------------------|
| | ithin 2 years before you filed for be | | | o anyone about your business? Inclu | de all financial institutions, |
| ∠ | No Yes. Fill in the details below. | | | | |
| | - | | Date issued | | |
| | Name | | MM/DD/YYYY | | |
| | Number Street | | | | |
| | City State | Zip Code | | | |
| Part 12 | Sign Below | | | | |
| and | d correct. I understand that making | a false statement, co | ncealing property, or ob | , and I declare under penalty of perjur taining money or property by fraud in rs, or both. 18 U.S.C. §§ 152, 1341, 151 | connection with a |
| | Signature of Debtor 1 | | | Signature of Debtor 2 | |
| | Date 5/6/2016 | | | Date | |
| Did | you attach additional pages to Yo No Yes | ur Statement of Finar | ncial Affairs for Individu | als Filing for Bankruptcy (Official For | m 107)? |
| Did | l you pay or agree to pay someone | who is not an attorne | y to help you fill out ban | kruptcy forms? | |
| ✓ | | | | | |
| | No Yes. Name of person | | | Attach the Bankruptcy Petition Pr | and Market |

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|--|---|--|--|--|------------------------------------|
| Fill in this informa | ation to identify your case | | | 0/10 10.17.32 | DC3C Main |
| Debtor 1 | Marie | | Randle | | |
| | First Name | Middle Name | Last Name | e | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | e | |
| United States Ba | ankruptcy Court for the: | Northern | District of Illinoi | s | |
| | | | (State | (e) | |
| Case number | | | | | |
| (If known) | | | | | |
| Official F | orm 108 | | | | Check if this is an amended filing |
| Stateme | nt of Intenti | on for Individ | uals Filing | Under Chapter 7 | 12/15 |
| ■ creditors hav ■ you have leas You must file thi whichever is ear If two married pe | e claims secured by you sed personal property a s form with the court w lier, unless the court e | and the lease has not expire within 30 days after you file xtends the time for cause. For in a joint case, both are one of the state o | red. e your bankruptcy You must also sen | petition or by the date set for the meetind copies to the creditors and lessors you e for supplying correct information. | |
| Re as complete | and accurate as nossil | hla. If mare enace is neede | d attach a congra | e sheet to this form. On the ton of any a | dditional pages |

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. | | | | |
|----|---|---|---|--|--|
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | |
| | Creditor's name: REGIONAL ACCEPTANCE CO Description of property securing debt: Hyundai , Sonata Value: \$8,150.00 | ✓ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: | ✓ No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |

| Debtor | Marie Case 16-15627 | Doc 1 | Filed 05/06/16 Document ne Dast Nam | Entered 05/06/16 18 Page 53 of 70 | 3:17:32 _{(if} | Desc Main |
|---------|--|-----------------|---|---|---------------------------|------------------------------|
| | First Name List Your Unexpired Pers | | | ie - known) | | |
| informa | | e leases. Une | pired leases are leases | cutory Contracts and Unexpired that are still in effect; the lease po. § 365(p)(2). | | |
| Des | scribe your unexpired personal p | property leases | s | | Will the lea | se be assumed? |
| Les | sor's name: Bernadette Kabir | | | | ☐ No ✓ Yes | |
| | scription of leased perty: Residential lease | | | | | |
| Les | sor's name: | | | | No Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | No Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | No Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | No Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | No Yes | |
| | scription of leased perty: | | | | | |
| Les | sor's name: | | | | No Yes | |
| | scription of leased perty: | | | | | |
| Part 3: | Sign Below | | | | | |
| | er penalty of perjury, I declare the subject to an unexpired lease | | ated my intention about | any property of my estate that s | ecures a del | ot and any personal property |
| 4. | | | | 4- | | |

| 🗶 /s/ Marie Randle | × |
|-----------------------------|-----------------------|
| Signature of Debtor 1 | Signature of Debtor 1 |
| Date 5/6/2016 MM/DD/YYYY | Date |

B 203 (12/94)

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Marie Randle | Case No. | |
|-------|---|--|-------------------------------|
| | Debtor | | (If known) |
| | | Chapter | Chapter 7 |
| | DISCLOSURE OF COMP | ENSATION OF ATTORNEY FO | R DEBTOR |
| 1 | compensation paid to me within one year before | P. 2016(b), I certify that I am the attorney for the asternation of the petition in bankruptcy, or agreed tor(s) in contemplation of or in connection with the | o be paid to me, for services |
| | For legal services, I have agreed to accept | | \$1,250.00 |
| | Prior to the filing of this statement I have receive | ved | \$0.00 |
| | Balance Due | | \$1,250.00 |
| 2 | . The source of the compensation paid to me was | : | |
| | ✓ Debtor | Other (specify) | |
| 3 | . The source of the compensation paid to me is: | | |
| | ✓ Debtor | Other (specify) | |
| 4 | . I have not agreed to share the above-disclomembers and associates of my law firm. | sed compensation with any other person unless th | ey are |
| | | compensation with a other person or persons who oppy of the agreement, together with a list of the natached. | |
| 5 | | reed to render legal service for all aspects of the b n, and rendering advice to the debtor in determining | |
| | b. Preparation and filing of any petition, sch | nedules, statements of affairs and plan which may | be required; |
| | c. Representation of the debtor at the meet | ing of creditors and confirmation hearing, and any | adjourned hearings thereof; |

d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

| | CERTIFICATION | |
|---|--|--|
| I certify that the foregoing is a complete sthe debtor(s) in this bankruptcy proceedings. | tatement of any agreement or arrangement for payment to me for representation of | |
| 5/6/2016 | /s/ Daniel Giannola | |

Signature of Attorney

Semrad Law Firm

Name of law firm

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 18:17:32 Desc Main UNITED STATES BANKBURTCY COURT Northern District of Illinois

| In re: | Randle, Marie | Case No | | | | |
|--------|--|---|--------------------------|--|--|--|
| _ | Debtor(s) | 0400110. | | | | |
| | | Chapter. Chapt | er7 | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | |
| | The above named Debtors hereby verify that the | attached list of creditors is true and correct to the | best of their knowledge. | | | |
| | | | | | | |
| Date: | 5/6/2016 | /s/ Randle, Marie | | | | |
| | | Randle, Marie | | | | |

Signature of Debtor

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REGIONAL ACCEPTANCE CO 765 ELA R D SUITE 205 LAKE ZURICH , IL 60004 USA

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, SD 57107 USA

SW CRDT SYS 2629 DICKERSON PK CARROLLTON , TX 75007 USA

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD , MN 56303 USA

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS , NV 89193 USA

CAPITAL ONE BANK USA N PO BOX 85520 RICHMOND , VA 23285 USA

AFNI, INC. PO BOX 3427 BLOOMINGTON , IL 61702 USA

COMENITY BANK/DRESSBRN PO Box 182273 Columbus , OH 43218 USA

ASHRO 1515 S 21ST ST CLINTON , IA 52732 USA

CACH LLC 370 17TH ST STE 5000 DENVER, CO 80202

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601 USA

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, IL 60601 USA Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 18:17:32 Desc Main Document Page 62 of 70

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace, IL 60181 USA

Family Mobile Po Box 629026 El Dorado Hls , CA 95762 USA

University of Chicago Medicine 15965 Collections Center Dr Chicago , IL 60693 USA

Holy Cross Hospital PO B 2166 Bedford Park , IL 60499 USA

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1250.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial:

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

| Date: 05/06/16 | |
|------------------|--------|
| Client Manukenlu | Client |
| Attorney Califur | |

Marie Randle Matter Number 477137-001

Initial: _____

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Document Page 65 of 70 Case number (# known) Debtor 1 Marie Middle Name First Name Last Name

| Part 6: Answer These Qu | uestions for Reporting Purposes | | | |
|--|--|--|--|---------------------------------|
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid tha funds will be available for distribution to unsecured creditors? | paid that funds will be available No. Yes. | | property is excluded and administrative os? | expenses are |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,0 | |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 milli \$10,000,001-\$50 mil \$50,000,001-\$100 m \$100,000,001-\$500 m | lion \$1,000,000,001 illion \$10,000,000,00 | -\$10 billion 1-\$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 m \$100,000,001-\$500 m | ilion \$1,000,000,001 illion \$10,000,000,000 | -\$10 billion 1-\$50 billion |
| Part 7: Sign Below | 1 have experienced this position, and | l de de se visite e e e e e e e e | | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** Is/Marie Randle Signature of Debtor 1 Signature of Debtor 2 | | | |
| | Executed on 5/6/2016 MM / DD / YY | | Executed onMM / DD / YYYY | |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|--------|--|
| Debtor 1 | Marie | Marie | | Randle | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing | ^{ng)} First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | _ | |
| Case number | | | (| | |
| (If known) | | | × | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | | | |
|---|--|---|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | |
| | ✓ No | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | |
| -0.00 A MARIE - MARIE | | agnature (Oniotal) onn 110). | | |
| | | | | |
| | | • | | |
| | Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | | | |
| × | /s/ Marie Randle \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | * | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | |
| | Date 5/6/2016 MM/DD/YYYY | DateMM/DD/YYYY | | |

Case 16-15627 Doc 1 Filed 05/06/16 Entered 05/06/16 18:17:32 Page 67 of 70 Case number (if known) Document Debtor 1 Marie Middle Name Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **✓** No Yes. Fill in the details below. Date issued MM/DD/YYYY Name Number Street City Zip Code State Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor Date 5/6/2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? **√** No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? Attach the Bankruptcy Petition Preparer's Notice, Yes. Name of person

Declaration, and Signature (Official Form 119).

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Debtor Marie Randle Case number (if 1 First Name Middle Name Last Name known) Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases No Lessor's name: Bernadette Kabir ✓ Yes Description of leased property: Residential lease No Lessor's name: Yes Description of leased property: No Lessor's name: ☐ Yes Description of leased property: No Lessor's name: Yes Description of leased property: No Lessor's name: Yes Description of leased property: No Lessor's name: Description of leased property: No Lessor's name: Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. /s/ Marie Randle Signature of Debtor 1 Signature of Debtor 1 Date 5/6/2016 MM/DD/YYYY MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re: | Randle, Marie | Case No | | |
|--------|---------------|----------|----------|--|
| | Debtor(s) | | | |
| | | Chapter. | Chapter7 | |

VERIFICATION OF CREDITOR MATRIX

The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Signature of Debtor

Date: 5/6/2016 /s/ Randle, Marie Randle, Marie

Entered 05/06/16 18:17:32 Case 16-15627 Doc 1 Filed 05/06/16 Desc Main Page 70 of 70 Case number (if known) Document. Debtor 1 Marie Middle Name First Name Last Name Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation \$0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$733.00 For your spouse \$0.00 9.Pension or retirement income. Do not include any amount received that was a \$0.00 benefit under the Social Security Act. 10.Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$16.00 Other Government Assistance +\$0.00 Total amounts from separate pages, if any. \$1,434.99 \$1,434.99 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11. \$1,434.99 Copy line 11 here → X 12 Multiply by 12 (the number of months in a year). 12b. 12b. The result is your annual income for this part of the form. \$17,219.88 13 Calculate the median family income that applies to you. Follow these steps: Illinois Fill in the state in which you live. 2 Fill in the number of people in your household. 13. Fill in the median family income for your state and size of household. \$63,896.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy derk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Sign Below Part 3:

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

/s/ Marie Randle

Signature of Debtor 1

Date 5/6/2016

MM/DD/YYYY

Signature of Debtor 2

Date 5/6/2016 MM/DD/YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.